

MANORCARE HEALTH SERVICES-WEST
1760 SHAWANO AVENUE

GREEN BAY 54303 Phone: (920) 499-5191
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/03): 105
Total Licensed Bed Capacity (12/31/03): 105
Number of Residents on 12/31/03: 93

Ownership: Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 100

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.7
Supp. Home Care-Personal Care	No					1 - 4 Years		35.5
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	2.2	More Than 4 Years		23.7
Day Services	No	Mental Illness (Org./Psy)	43.0	65 - 74	12.9			----
Respite Care	No	Mental Illness (Other)	2.2	75 - 84	36.6			82.8
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	38.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.7	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.1		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.2		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	18.3	65 & Over	97.8	-----		
Transportation	No	Cerebrovascular	7.5	-----		RNs		9.7
Referral Service	No	Diabetes	2.2	Gender	%	LPNs		10.8
Other Services	Yes	Respiratory	2.2	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	21.5	Male	29.0	Aides, & Orderlies		41.8
Mentally Ill	No		----	Female	71.0			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	24	100.0	292	41	89.1	106	4	100.0	106	19	100.0	152	0	0.0	0	0	0.0	88	94.6
Intermediate	---	---	---	5	10.9	89	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	5	5.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	24	100.0		46	100.0		4	100.0		19	100.0		0	0.0		0	0.0	93	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	0.4	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	3.2	51.6	45.2	93
Other Nursing Homes	2.0	Dressing	16.1	34.4	49.5	93
Acute Care Hospitals	95.6	Transferring	26.9	45.2	28.0	93
Psych. Hosp.-MR/DD Facilities	0.4	Toilet Use	18.3	41.9	39.8	93
Rehabilitation Hospitals	0.0	Eating	59.1	20.4	20.4	93
Other Locations	1.6	*****				
Total Number of Admissions	250	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	6.5		Receiving Respiratory Care	14.0
Private Home/No Home Health	23.1	Occ/Freq. Incontinent of Bladder	60.2		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	24.7	Occ/Freq. Incontinent of Bowel	43.0		Receiving Suctioning	0.0
Other Nursing Homes	1.2				Receiving Ostomy Care	1.1
Acute Care Hospitals	21.9	Mobility			Receiving Tube Feeding	3.2
Psych. Hosp.-MR/DD Facilities	0.4	Physically Restrained	3.2		Receiving Mechanically Altered Diets	44.1
Rehabilitation Hospitals	0.0					
Other Locations	5.7	Skin Care			Other Resident Characteristics	
Deaths	23.1	With Pressure Sores	5.4		Have Advance Directives	72.0
Total Number of Discharges		With Rashes	1.1		Medications	
(Including Deaths)	247				Receiving Psychoactive Drugs	31.2

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.2	86.2	1.10	87.6	1.09	88.1	1.08	87.4	1.09
Current Residents from In-County	94.6	78.5	1.21	83.0	1.14	82.1	1.15	76.7	1.23
Admissions from In-County, Still Residing	13.2	17.5	0.75	19.7	0.67	20.1	0.66	19.6	0.67
Admissions/Average Daily Census	250.0	195.4	1.28	167.5	1.49	155.7	1.61	141.3	1.77
Discharges/Average Daily Census	247.0	193.0	1.28	166.1	1.49	155.1	1.59	142.5	1.73
Discharges To Private Residence/Average Daily Census	118.0	87.0	1.36	72.1	1.64	68.7	1.72	61.6	1.92
Residents Receiving Skilled Care	94.6	94.4	1.00	94.9	1.00	94.0	1.01	88.1	1.07
Residents Aged 65 and Older	97.8	92.3	1.06	91.4	1.07	92.0	1.06	87.8	1.11
Title 19 (Medicaid) Funded Residents	49.5	60.6	0.82	62.7	0.79	61.7	0.80	65.9	0.75
Private Pay Funded Residents	20.4	20.9	0.98	21.5	0.95	23.7	0.86	21.0	0.97
Developmentally Disabled Residents	0.0	0.8	0.00	0.8	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	45.2	28.7	1.57	36.1	1.25	35.8	1.26	33.6	1.34
General Medical Service Residents	21.5	24.5	0.88	22.8	0.94	23.1	0.93	20.6	1.05
Impaired ADL (Mean)	56.1	49.1	1.14	50.0	1.12	49.5	1.13	49.4	1.14
Psychological Problems	31.2	54.2	0.58	56.8	0.55	58.2	0.54	57.4	0.54
Nursing Care Required (Mean)	8.6	6.8	1.27	7.1	1.22	6.9	1.24	7.3	1.17